



New Hope Police Department

41 North Main Street • New Hope Pennsylvania 18938

Phone: (215) 862-3033 • Fax: (215) 862-3570

www.newhopepd.org

Henry "Rick" Pasqualini
Chief of Police

Laurence D. Keller
Mayor

New Hope Borough Police Department Taser Policy

I. Policy

- A. The provisions of this policy are intended to be used within the guidelines established in the New Hope Boro Police Dept. use of force policy and will be applicable to all members of the department while on duty and engaged in their official duties.
- B. The X26 Taser is a defensive weapon listed in the force continuum under #3 chemical agents. The decision to use the X26 is the same as the decision to use OC spray to overcome resistance of the individual. Therefore an officer does not have to get dangerously close to a threat to try chemical agents to control an individual before resorting to the X26.

II. Purpose

- A. The purpose of this policy and procedure is to provide the New Hope Borough Police Department with guidelines for the use of the X26 through techniques that are designed to allow them to defend themselves against aggressive subjects or to compel uncooperative subjects to obey a legal order.
- B. The X26 is deployed as an additional police tool and is not intended to replace firearms or self-defense techniques. The X26 may be used to control a dangerous or violent subject when deadly force does not appear to be justified and/or necessary, or attempts to subdue the subject by other conventional tactics have been, or likely will be, ineffective in the situation at hand; or there is reasonable expectation that it will be unsafe for officers to approach within contact range of the subject.

III. Procedures

A. Definitions:

- 1. **X26 TASER**- The X26 Taser manufactured by TASER International.
- 2. **EMD**- Electro-muscular disruption (EMD) is a direct involuntary contraction of the muscles that disrupts neuron-motor control.
- 3. **AFID**- (Anti-felony identification device). Every time an X26 TASER cartridge is deployed, 40 small confetti like ID tags

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called AFIDs are ejected. Each AFID contains the serial number of the cartridge deployed allowing the staff to identify which officer deployed the cartridge.

4. **Cartridge-** The X26 Taser Cartridge is a single use item that is identified by a serial number. The X26 Trainer will record the serial number of the cartridge assigned to each officer. The cartridge is tamper resistant and is sealed with the AFID system in place.

B. Approved Equipment and Training

1. An X26 Taser and at least one replacement cartridge will be issued to and used only by officers who have successfully completed the Departments X26 Certification Training Program.
2. Officers will only carry properly functioning and charged X26 Tasers.
3. Officers will only carry the X26 and replacement cartridge(s) that is issued to them by serial number, unless a supervisor issues a replacement X26 or cartridge to the officer with the serial number recorded.
4. Officers will carry the X26 in a holster that is issued and approved by the New Hope Boro Police Department.
5. Officers will carry the X26 replacement cartridges only in a holder that is approved by the New Hope Boro Police Department.
6. All officers who carry and/or use an X26 must first successfully complete the X26 Taser program, to include written and practical tests. A mandatory re-certification course will be completed annually. The re-certification will be a minimum of 4 hours.

C. Maintenance and Care of Equipment

1. Officers will check the X26 before the start of each shift to ensure the unit is properly charged. Officers will immediately advise a supervisor or the X26 trainer if the battery is low.
2. Officers will check the X26 case and cartridge before the start of each shift for any damage. Officers will immediately advise a supervisor or the X26 trainer if they discover any damage.
3. Officers will not write on or adhere anything (i.e. stickers, tape, etc.) to the X26 or the cartridge.
4. Officers must carry the X26 on the weak side with the safety in the "safe" position.
5. Officers will ensure that the cartridge has not expired. If the cartridge is expired, Officers will ask a supervisor or the X26 Trainer for a new cartridge, so the serial number can be recorded. Under no circumstances will an expired cartridge be used.

D. Information on the X26 Taser

1. The X26 Taser uses propelled wires to conduct electrical energy, which overrides a subject's central nervous system, incapacitating the subject. The X26 Taser causes uncontrollable contraction of the muscle tissue, debilitating the subject regardless of pain tolerance or mental focus. It is a less than lethal use of force option and its deployment will be reasonable, based on the totality of the circumstances known to the officer at the time.
2. There are some minor side effects that are associated with the X26 which include minor puncture wounds and skin irritation at the probe delivery sight. The X26 does not have any effect on heart rhythms or implanted pacemakers. There is also a slight risk of loss of bladder and/or bowel control.
3. The X26 is programmed to deliver a 5-second electrical current. The officer using the X26 can shorten the automatic 5-second cycle by turning the unit off. It is recommended that during field deployment and use of the X26, the full 5-second cycle be delivered to gain maximum effectiveness and compliance of the subject.
4. The X26 deploys two probes from a replaceable cartridge for up to 21 feet. These probes are connected to the X26 by insulated wires. When the probes make contact with the subject, the X26 transmits BMD pulses along the wires and into the body through up to 2-inches of clothing.
5. The probes are #8 straightened fishhooks that can penetrate a maximum of 1/4 inch.
6. The X26 may be deployed from 3 to 21 feet, but the optimal range is 7 to 15 feet.
7. The X26 is not a substitute for deadly force and should not be used in those situations. Deployment of the X26 should be backed up with the availability of lethal force. The X26 maybe used in those situations where:
 - a) **Defensive Resistance**- Physical actions that attempt to prevent officer control
 - b) **Active Aggression**- Physical actions of assault against the officer or another person.
 - c) **Aggravated Active Aggression**- Physical actions of assault that could result in serious bodily injury or death
8. The X26 will never be used punitively or for purposes of coercion. It is to be used as a way of averting a potentially injurious or dangerous situation. The X26 will not be used in the following instances.
 - a) Coercion of any type.

- b) To threaten or gain information from a person.
- c) Intimidation by reckless display.
- d) Waking unconscious or intoxicated individuals.
- e) Escorting or prodding individuals
- f) Individuals operating a motor vehicle
- g) An individual holding a firearm and their finger is on the trigger.
- h) Handcuffed prisoner's resisting/refusing to enter a police vehicle, holding room, or hanging onto a railing or other item, etc.
- i) The X26 should NEVER be deployed around flammable liquids. The X26 can ignite gas and other flammable liquids. Some self-defense sprays are flammable and should not be used in conjunction with the X26. It will not be used at subjects who have come in contact with flammables or in environments where flammables are obviously present. Officers should be especially aware of this when in known or suspected meth lab environments.
- j) Obviously pregnant women, children, or the elderly.
- k) No officer will playfully, maliciously, or intentionally misuses the X26 against an individual or another Officer.
- l) The suspect is in danger of falling from a significant height.
- m) In any significant amount of water which may cause the subject to drown and hinder other officers assisting in the apprehension of the subject. Deep water also reduces the target area.

E. Use of the X26 Taser on a person or vicious animal

1. Prior to use officers should consider the totality of the circumstances, giving the most weight to these factors.
 - a) Whether the subject is posing a current threat to the safety of the officers or others?
 - b) What is the severity and violence level of the crime?
 - c) Does the subject have a history of violent behavior?
2. Before deploying the X26, the Officer shall shout "TASER" to alert officers on scene that the X26 is about to be used. This technique is to help Officers be aware that the X26 is being deployed and not a firearm.
3. Aim at the center of mass or legs. NEVER aim the X26 at the eyes, face, neck, or groin. It is laser sighted so that the top probe will follow both the front/rear and laser sight: the bottom, probe will travel at an 8-degree downward angle below the front/rear or laser sighted area. The rule of thumb for the bottom probe is that it drops 1 foot for every 7 feet it travels.

4. Upon firing the X26, the officer shall energize the subject the least number of times necessary to accomplish the legitimate operational objective. The subject should be secured as soon as practical while disabled by the Taser power to minimize the number of deployment cycles.
5. If the X26 is used on an individual running from officers, the deploying officer will need to articulate the basis for use in the narrative of their incident report.
6. The X26 may also be used in certain circumstances in a "touch stun" mode. This involves removing the cartridge and pressing the unit against an appropriate area of the body based on training. It is important to note that when the device is used in this manner it is:
 - a) Primarily a pain compliance tool due to lack of probe spread.
 - b) Minimally effective when compared to conventional cartridge type deployments.
 - c) More likely to leave marks on the subject's skin.
 - d) Subject to the same deployment guidelines and restrictions as that of the X26 cartridge deployments.

F. Duties after Deployment of the X26 Taser

1. Officers will request medical personnel to respond to assess the subject if the probes penetrated the skin or the subject is injured or complains of injury. Once the medical personnel assess the subject and if the examine or other circumstances dictate the subject needs further medical treatment; the subject will be transported to the appropriate medical facility.
2. The subject will not be allowed to remove the probes themselves under any circumstances.
7. ⇒ 3. The Taser operator or another officer will remove the probes from the subject's skin. The officers will wipe down the area where the probes penetrated with alcohol and apply bandages to the area if requested by the subject.
4. If the probes are stuck in the victims clothing and they have not penetrated the skin, Officers may remove those and secure them using the same guidelines set forth in line #7 and #8.
5. If other reasons dictate that an ambulance is needed, medical personnel will remove the probes from the subject on scene, unless the probes are located in the subject's eyes, face, throat or groin area. If the probes are located in any of these areas the subject will be stabilized and taken to the appropriate medical facility.

6. If the probes are located anywhere that requires the subject to be transported to any medical facility, pictures will be taken of the probe impact site before and after the removal of the probes.
7. The probes are considered to be a biohazard. Officers will handle the probes with latex gloves and place them in the cartridge face down and secure them with tape.
8. The cartridge and probes will be placed in a plastic container and then into a plastic evidence envelope and marked with biohazard stickers. It will then be placed into evidence and the property report number put on the envelope and the Taser Usage Report Form.
9. Photographs will be taken of the probe impact sight and photographs shall also be taken if any injury occurs as a result of a secondary fall.
10. Officers will attempt to locate the yellow, pink, and clear colored "AFID" dispersed at the time of firing. These will be collected and placed into evidence with any expended cartridges.
11. Each time the X26 is drawn and NOT discharged the officer will complete the Taser Usage Report Form.
12. The Officer in charge will notify the Sergeant of the discharge. Each discharge of the X26, including accidental, must be documented utilizing the Taser Usage Report Form. Each time the X26 is discharged it stores the downloadable time, date, duration, and battery power at the time of discharge.
13. The X26 that was discharged will be placed out of service until the X26 trainer can download the information from the unit and assign a new cartridge.
14. The Sergeant shall ensure the proper notifications have been made to the Chief of Police as soon as possible.
15. The Sergeant shall ensure that the officer completes the Taser Usage Report Form. The Taser Usage Report Form will be attached to an incident report and forwarded to the Chief of Police and the X26 trainer.

G. X26 Trainer Responsibilities

1. The X26 Trainer shall receive, inspect, and ensure the maintenance and replacement of the X26 devices assigned to the officers.
2. Establish and maintain systems to record issuance of the X26 and the air cartridges. Serial number will be recorded and maintained by the trainer and/or the Chief of Police. A log book will be secured by the Trainer and/or the Chief of Police.
3. Maintain an adequate supply of batteries and air cartridges for replacement.

4. Return defective or damaged X26 Taser and air cartridges to the supplier for replacement.
5. Obtains service and/or replacement for defective or damaged X26 components from the supplier.
6. Receive and ensure that used cartridges are packaged and marked correctly. He will then forward them to the evidence officer to be stored in the evidence locker.
7. Review copies of the "Taser Usage Report Form" for completeness and maintain a copy with his training files.
8. The X26 trainer will be responsible for downloading the information from the dataport from each X26 Taser that has been discharged. The trainer will attach a copy of the information to the incident report and forward a copy to the Sergeant and/or the Chief of Police
9. Provide annual re-training to certified users. The X26 Trainer will document and maintain all training records and forward copies to the Chief of Police to be placed in each officers training file.
10. Maintain training updates from TASER International.

Chief Henry Papualani
Oct. 10, 2007



County of Bucks

POLICE TRAINING CENTER
1760 S. EASTON ROAD, DOYLESTOWN, PA 18901
PHONE (215) 340-8410 -- FAX (215) 343-6794



County Commissioners

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HARRY C. McCANN, JR.
Director

To: All Chiefs/Training Officers

From: Harry McCann *HM*
Director, Law Enforcement Training

Date: November 7, 2007

Please read the attached bulletin received from the Pennsylvania Department of Health regarding the use of a Taser. All questions should be referred to the Department of Health. (717) 787-8740. Thank you.

HM/dmr
attachment

DEPARTMENT OF HEALTH

EMS Information Bulletin- #032

DATE: November 10, 2005

SUBJECT: Treatment of Patients Exposed to TASER®, Non-Lethal Device

TO: EMS Practitioners
Ambulance Services
Medical Command Facilities and Physicians
EMS Medical Directors

FROM: Emergency Medical Services Office
Pa Department of Health
(717) 787-8740

The Pennsylvania Department of Health Emergency Medical Services Office (EMS Office) has received many inquiries regarding the TASER®, non-lethal devices for use in the law enforcement, military, private security and personal defense markets. In an effort to provide the Emergency Medical Services in the Commonwealth guidance in treating individuals who have been tased, the EMS Office has prepared the following information.

- ❑ If a police department requests assistance from an Emergency Medical Service organization, the unit shall respond as requested by the Public Safety Answering Point (PSAP). Upon arrival, the patient should be assessed and treated by utilizing the appropriate treatment protocol. All patients who have been tased *should be transported* to the appropriate emergency department. The Emergency Medical Service practitioners shall not medically clear and individual in the prehospital setting.
- ❑ If the patient meets the guidelines for refusal of care and or treatment, a patient may refuse treatment and all applicable documentation shall be secured prior to departing the scene. Medical Command shall be contacted as appropriate based on protocol or as needed by the prehospital providers.
- ❑ If a patient was tased, law enforcement should accompany the patient during transport if the patient is agitated or if there is any concern for the safety of the EMS practitioners. (See BLS Protocol 801 Agitated Behavior/Psychiatric Disorders)

- The TASER® delivers electric impulses through probes. These probes are shot into the patient. These probes should be treated as impaled objects and not removed unless they are affecting the airway, or may prevent life saving treatment.

Please forward any questions regarding this issue to paemsoffice@state.pa.us.